	L CONTRIBUTIONS HAN PLEDGES OR LOANS		(	SCHEDULE A1 FOR FORMS C/OH & SPAC)
THE INSTRUC	FION GUIDE explains how to complete this form.		1 Total pages Scheo	lule A: 44
2 FILER NAMI	E John Stevenson		3 ACCOUNT# (E	thics Commission filers)
4 Date 4/6/03	5 Full name of contributor out Anne and Bob Bass 6 Contributor address: City: State: Zip code 6221 Westover Drive Fort Worth TX  upation (Optional)		7 Amount of Contribution (\$) 1,000	8 In-Kind Contribution description (if applicable)
o i iliopai occi	apation (Optional)	10 Employer	(Optional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li></ul>	of state PAC	7 Amount of Contribution (\$) 125	8 In-Kind Contribution description (if applicable)
9 Principal Occi	upation (Optional)	10 Employer	(Optional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor  ut out Judy and Jon Nelson</li> <li>6 Contributor address: City: State: Zip code 6236 Kenwick Ave</li> <li>Fort Worth TX</li> </ul>	of state PAC	7 Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
9 Principal Occu	upation (Optional)	10 Employer	(Optional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor  ut out</li> <li>Dan and Gail Settle</li> <li>6 Contributor address: City: State: Zip code 6301 Rosemont</li> <li>Fort Worth TX</li> </ul>	of state PAC	7 Amount of Contribution (\$) 300	8 In-Kind Contribution description (if applicable)
9 Principal Occu	upation (Optional)	10 Employer	(Optional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li> <li>Janna and Dan Poland</li> <li>6 Contributor address: City: State: Zip code 6316 Indian Creek</li> <li>Fort Worth TX</li> </ul>	of state PAC	7 Amount of Contribution (\$)	8 In-Kind Contribution description (if applicable)
9 Principal Occu	pation (Optional)	10 Employer	(Optional)	
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2 FILER NAME	John Stevenson	3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li></ul>	Contribution (\$) description (if applicable)	
9 Principal Occi	upation (Optional) 10 Emplo	loyer (Optional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li></ul>	AC 7 Amount of 8 In-Kind Contribution Contribution (\$) description (if applicable)	
9 Principal Occi	upation (Optional) 1 0 Emplo	loyer (Optional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li></ul>	AC 7 Amount of 8 In-Kind Contribution Contribution (\$) description (if applicable)	
9 Principal Occu	upation (Optional) 1 0 Emplo	loyer (Optional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li></ul>	AC 7 Amount of Contribution (\$) 8 In-Kind Contribution description (if applicable)	
9 Principal Occu	upation (Optional) 10 Emplo	loyer (Optional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li></ul>	AC 7 Amount of 8 In-Kind Contribution description (if applicable)	
9 Principal Occi	upation (Optional) 10 Emplo	loyer (Optional)	
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	L CONTRIBUTIONS HAN PLEDGES OR LOANS				(FOR FORMS C/OH & SPAC)
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2 FILER NAM	E John Stevenson		3	ACCOUNT # (E	Ethics Commission filers)
4 Date 4/6/03  9 Principal Occ	5 Full name of contributor under our Linda and Bob Herchert  6 Contributor address: City: State: Zip code 6621 Meadow Haven Drive Fort Worth TX upation (Optional)	t of state PAC	7	Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
	E Full some of contribute		· · · ·		
4 Date 4/6/03	5 Full name of contributor ou John F. Tinsley  6 Contributor address: City: State: Zip code 6713 Brants Lane Fort Worth TX	t of state PAC	7	Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
9 Principal Occi	upation (Optional)	10 Employer	r (Opt	ional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li></ul>	t of state PAC	7	Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
9 Principal Occi	upation (Optional)	10 Employer	(Opti	ional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li> <li>Ann and Malcolm Louden</li> <li>6 Contributor address: City: State: Zip code 709 Alta</li> <li>Fort Worth TX</li> </ul>	of state PAC	7	Amount of Contribution (\$) 1,000	8 In-Kind Contribution description (if applicable)
9 Principal Occu	upation (Optional)	10 Employer	(Opti	onal)	
4 Date 4/6/03	Honorable Kay Granger  6 Contributor address: City: State: Zip code 715 Jones Street Fort Worth TX	of state PAC	,	Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
9 Principal Occu	upation (Optional)	10 Employer	(Opti	onal)	
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	L CONTRIBUTIONS HAN PLEDGES OR LOANS			(	SCHEDULE A1 (FOR FORMS C/OH & SPAC)
THE INSTRUCT	ΓΙΟΝ GUIDE explains how to complete this form.		1	Total pages Sched	dule A: 44
2 FILER NAME	John Stevenson		3	ACCOUNT# (E	thics Commission filers)
4 Date 4/6/03	5 Full name of contributor  ut  A.E. Rogers III  6 Contributor address: City: State: Zip code  7808 Vinca Circle  Fort Worth TX  upation (Optional)	of state PAC	7	Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
•		Employor	. (0)		
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li></ul>	of state PAC	7	Amount of Contribution (\$)	8 In-Kind Contribution description (if applicable)
9 Principal Occu	upation (Optional)	10 Employer	r (Opt	ional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor  utout</li> <li>Emily and Bill O'Grady</li> <li>6 Contributor address: City: State: Zip code</li> <li>813 Hillcrest</li> <li>Fort Worth TX</li> </ul>	of state PAC	7	Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
9 Principal Occu	upation (Optional)	10 Employer	r (Opt	ional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li> <li>Debbie and Bob Hazen</li> <li>6 Contributor address: City: State: Zip code 813 Raintree Road</li> <li>Fort Worth TX</li> </ul>	of state PAC	7	Amount of Contribution (\$) 25	8 In-Kind Contribution description (if applicable)
9 Principal Occu	upation (Optional)	10 Employer	(Opt	ional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor  ut</li> <li>Melinda and Eddie Gossage</li> <li>6 Contributor address: City: State: Zip code 8920 Crest Wood</li> <li>Fort Worth TX</li> </ul>	of state PAC	,	Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
9 Principal Occu	upation (Optional)	10 Employer	(Opti	ional)	
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2 FILER NAME	John Stevenson		3 ACCOUNT#	(Ethics Commission filers)
4 Date 4/6/03	<ul> <li>5 Full name of contributor  ut</li> <li>Christina and Elton Hyder</li> <li>6 Contributor address: City: State: Zip code</li> <li>900 Alta Drive</li> <li>Fort Worth TX</li> <li>Upation (Optional)</li> </ul>	of state PAC	7 Amount of Contribution (\$) 250 r (Optional)	8 In-Kind Contribution description (if applicable)
• Timospai Good		. u Employer		
4 Date 4/6/03	<ul> <li>5 Full name of contributor  utlease</li> <li>Ann and David Chappell</li> <li>6 Contributor address: City: State: Zip code</li> <li>932 Roaring Springs Road</li> <li>Fort Worth TX</li> </ul>	of state PAC	7 Amount of Contribution (\$) 500	8 In-Kind Contribution description (if applicable)
9 Principal Occi	upation (Optional)	10 Employer	r (Optional)	
4 Date 4/6/03	Betsy and George Pepper	of state PAC	7 Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
9 Principal Occi	upation (Optional)	10 Employer	r (Optional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor  utility</li> <li>Nelsie and Joe Chumlea</li> <li>6 Contributor address: City: State: Zip code P. O. Box 121745</li> <li>Fort Worth TX</li> </ul>	of state PAC	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
9 Principal Occ	upation (Optional)	10 Employe	r (Optional)	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li> <li>Ann L. Diamond</li> <li>6 Contributor address: City: State: Zip code</li> <li>P.O. Box 20052</li> <li>Fort Worth TX</li> </ul>	of state PAC	7 Amount of Contribution (\$) 25	8 In-Kind Contribution description (if applicable)
9 Principal Occ	upation (Optional)	10 Employe	r (Optional)	
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2 FILER NAME	John Stevenson		3	ACCOUNT# (E	thics Commission filers)
4 Date 4/6/03  9 Principal Occur	Dan J. Craine  6 Contributor address: City: State: Zip code P.O. Box 3062  Fort Worth TX	of state PAC		Amount of (\$) 500	8 In-Kind Contribution description (if applicable)
<b>4</b> Date 4/6/03	5 Full name of contributor until out of Ralph Carr 6 Contributor address: City: State: Zip code P.O. Box 470821 Fort Worth TX	of state PAC	7	Amount of Contribution (\$)	8 In-Kind Contribution description (if applicable)
9 Principal Occi	upation (Optional)	10 Employe	r (Opti	onal) į	
4 Date 4/6/03	<ul> <li>5 Full name of contributor</li></ul>	of state PAC	7	Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
9 Principal Occ	upation (Optional)	10 Employe	r (Opti	ional)	
4 Date 4/9/03	5 Full name of contributor  ut out of Amy and Nick Tepe 6 Contributor address: City: State: Zip code 1135 North Glenhurst Drive Birmingham MI	of state PAC	7	Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
9 Principal Occupation (Optional) 10 Employer (Optional)					
4 Date 4/9/03	5 Full name of contributor ut Sarah and Doug Baird 6 Contributor address: City: State: Zip code 120 Churchwardens Road Baltimore MD	of state PAC	,	Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
9 Principal Occ	9 Principal Occupation (Optional) 1 0 Employe			tional)	
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2 FILER NAME	John Stevenson		3 ACCOUNT # (Ethics Commission filers)
4 Date 4/9/03  9 Principal Occu	5 Full name of contributor  ut of state I Olivia G. Mason 6 Contributor address: City: State: Zip code 1237 Shady Oaks Lane Fort Worth TX		7 Amount of Contribution (\$) 8 In-Kind Contribution description (if applicable) 250
• Timopar coo	paner (epinera)		(opasital)
4 Date 4/9/03	<ul> <li>5 Full name of contributor  ut of state</li> <li>Mike Palmer</li> <li>6 Contributor address: City: State: Zip code</li> <li>150 Boland, #507</li> <li>Fort Worth TX</li> </ul>	PAC	7 Amount of 8 In-Kind Contribution Contribution (\$) description (if applicable)  25
9 Principal Occu	ipation (Optional) 10 Em	ployer	(Optional)
4 Date 4/9/03	<ul> <li>Full name of contributor  ut of state</li> <li>Barbara and Jeff Wentworth</li> <li>Contributor address: City: State: Zip code</li> <li>1513 Catalina</li> <li>Fort Worth TX</li> </ul>	PAC	7 Amount of Contribution (\$) 8 In-Kind Contribution description (if applicable)
9 Principal Occu		nployer	(Optional)
4 Date 4/9/03	5 Full name of contributor □ out of state Paul and Sarah Ray 6 Contributor address: City: State: Zip code 1801 Eldridge St. Fort Worth TX	PAC	7 Amount of Contribution (\$) 250 8 In-Kind Contribution (if applicable)
9 Principal Occi	upation (Optional) 10 Em	nployer	(Optional)
4 Date 4/9/03	<ul> <li>5 Full name of contributor</li></ul>	PAC	7 Amount of Contribution (\$) 300 8 In-Kind Contribution description (if applicable)
9 Principal Occi	9 Principal Occupation (Optional) 10 Employer (Optional)		
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2 FILER NAME	John Stevenson	3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/9/03  9 Principal Occur	5 Full name of contributor  ut of state PAC Donna and Val Wilkie  6 Contributor address: City: State: Zip code 309 Main Street Fort Worth TX  upation (Optional)  10 Employe	Contribution (\$) description (if applicable)	
4 Date 4/9/03	5 Full name of contributor	7 Amount of Contribution (\$)   8 In-Kind Contribution (frapplicable)	
9 Principal Occupation (Optional) 10 Employer		(Optional)	
4 Date 4/9/03	<ul> <li>Full name of contributor</li></ul>	7 Amount of Contribution (\$) 8 In-Kind Contribution description (if applicable)	
9 Principal Occu		er (Optional)	
4 Date 4/9/03	<ul> <li>Full name of contributor  ut of state PAC</li> <li>Mr. and Mrs. William Sarsgard</li> <li>Contributor address: City: State: Zip code</li> <li>4400 Bombay Court</li> <li>Fort Worth TX</li> </ul>	7 Amount of Contribution (\$) 8 In-Kind Contribution description (if applicable)	
9 Principal Occu	upation (Optional) 1 0 Employe	er (Optional)	
4 Date 4/9/03	<ul> <li>5 Full name of contributor</li></ul>	7 Amount of Contribution (\$) description (if applicable)	
9 Principal Occu	pation (Optional) 1 0 Employe	er (Optional)	
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THE INSTRUC	FION GUIDE explains how to complete this form.	1 Total pages Schedule A: 44	
2 FILER NAMI	John Stevenson	3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/9/03  9 Principal Occi	5 Full name of contributor □ out of state PAC Nina and Gary Cole 6 Contributor address: City: State: Zip code 5044 Byers Avenue Fort Worth TX  upation (Optional) □ 10 Employee	Contribution (\$) description (if applicable)	
4 5	F. Full name of contributor		
4 Date 4/9/03	<ul> <li>5 Full name of contributor</li></ul>	7 Amount of 8 In-Kind Contribution (\$) description (if applicable) 50	
9 Principal Occu	upation (Optional) 1 0 Employe	er (Optional)	
4 Date 4/9/03	<ul> <li>5 Full name of contributor</li></ul>	7 Amount of Contribution (\$)   8 In-Kind Contribution description (if applicable)	
9 Principal Occu	upation (Optional) 1 0 Employe	er (Optional)	
4 Date 4/9/03	5 Full name of contributor  ut of state PAC Carolyn and Bob Whitt  6 Contributor address: City: State: Zip code 6221 Skylark Circle Fort Worth TX	7 Amount of Contribution (\$)   8 In-Kind Contribution description (if applicable)	
9 Principal Occu	pation (Optional) 10 Employe	er (Optional)	
4 Date 4/9/03	<ul> <li>Full name of contributor</li></ul>	7 Amount of Contribution (\$)   8 In-Kind Contribution description (if applicable)	
9 Principal Occu	pation (Optional) 10 Employe	er (Optional)	
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2 FILER NAM	E John Stevenson	3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/15/03  9 Principal Occ	5 Full name of contributor  ut of state Joy and James DuBose  6 Contributor address: City: State: Zip code 1200 Shady Oaks Lane Fort Worth TX  upation (Optional)	PAC 7 Amount of Contribution (\$) 8 In-Kind Contribution description (if applicable)	
4 Date 4/15/03	5 Full name of contributor utof state Dr. Bill and Brenda Maxwell 6 Contributor address: City: State: Zip code 1215 Hillcrest Street Fort Worth TX	PAC 7 Amount of Contribution (\$) 8 In-Kind Contribution description (if applicable)	
9 Principal Occi	upation (Optional)	nployer (Optional)	
4 Date 4/15/03	<ul> <li>5 Full name of contributor  ut of state</li> <li>Sally and David Beyer</li> <li>6 Contributor address: City: State: Zip code</li> <li>1520 Shady Oaks Ln.</li> <li>Fort Worth TX</li> </ul>	PAC 7 Amount of Contribution (\$) 8 In-Kind Contribution description (if applicable)	
9 Principal Occu	upation (Optional) 10 Er	pployer (Optional)	
4 Date 4/15/03	<ul> <li>5 Full name of contributor</li></ul>	PAC 7 Amount of Contribution (\$) 8 In-Kind Contribution description (if applicable)	
9 Principal Occu	upation (Optional) 10 Er	ployer (Optional)	
4 Date 4/15/03	<ul> <li>5 Full name of contributor</li></ul>	PAC 7 Amount of Contribution (\$) description (if applicable)	
9 Principal Occu	pation (Optional) 10 En	ployer (Optional)	
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